Companies House

CS01 (ef)

Confirmation Statement

Company Name: **RACHAEL TRACEY OCCUPATIONAL THERAPY LIMITED**
Company Number: **10171620**

Received for filing in Electronic Format on the:**02/06/2017**

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Company Name:	**RACHAEL TRACEY OCCUPATIONAL THERAPY LIMITED**
Company Number:	**10171620**
Confirmation Statement date:	**09/05/2017**
Sic Codes:	**86900**
Principal activity description:	**Other human health activities**

Statement of Capital (Share Capital)

Class of Shares:	**ORDINARY**	Number allotted	**100**
Currency:	**GBP**	Aggregate nominal value:	**1**

Prescribed particulars

FULL RIGHTS TO RECEIVE NOTICE OF, ATTEND AND VOTE AT GENERAL MEETINGS. ONE SHARE CARRIES ONE VOTE, AND FULL RIGHTS TO DIVIDENDS AND CAPITAL DISTRIBUTIONS (INCLUDING UPON WINDING UP).

Statement of Capital (Totals)

Currency:	**GBP**	Total number of shares:	**100**
		Total aggregate nominal value:	**1**
		Total aggregate amount unpaid:	**0**

Persons with Significant Control (PSC)

PSC notifications

Notification Details

Date that person became registrable: **01/07/2016**

Name: **MISS RACHAEL TRACEY**

Service address recorded as Company's registered office

Country/State Usually Resident: **AUSTRALIA**

Date of Birth: ****/06/1989**

Nationality: **NEW ZEALANDER**

Nature of control

The person holds, directly or indirectly, 75% or more of the shares in the company.

The person holds, directly or indirectly, 75% or more of the voting rights in the company.

Confirmation Statement

I confirm that all information required to be delivered by the company to the registrar in relation to the confirmation period concerned either has been delivered or is being delivered at the same time as the confirmation statement

Authorisation

Authenticated

This form was authorised by one of the following:

Director, Secretary, Person Authorised, Charity Commission Receiver and Manager, CIC Manager, Judicial Factor